

Alton Parks and Recreation: Creating Community Through People, Parks and Programs



2010 Adult Co-Ed Softball League

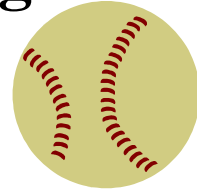
REGISTRATION FORM

\$30.00 Registration Fee, Payable to your coach

Our contact information:

Alton Parks and Recreation,
P.O. Box 659, Alton, NH 03809

Phone: 875-0109 * Fax- 875-0242 * E-mail: parksrec@alton.nh.gov



Player's Information- please use one form per person

Player's Name _____ Age on June 21, 2010 _____

Address _____

Home Phone _____ Email _____

Person to notify in emergency _____ Telephone _____

Doctor to notify in emergency _____ Telephone _____

****Please list allergies/limitations/medications:** _____

WAIVER AND RELEASE OF LIABILITY

Please read and sign below.

Participation in the Adult Co-Ed Softball League Program may involve risk of injury including but not limited to sprains, bruises, torn muscles, broken bones, eye and head injuries and possible death. I attest and verify that I am at least 18 years old and that I have full knowledge of the risks involved in the Adult Co-Ed Softball League Program. I attest and verify that I am physically fit to participate in the Adult Co-Ed Softball League Program. I hereby for myself, my heirs, executors and administrators waive and release all rights and claims against the Town of Alton, its officers, agents, employees and volunteers, except in the case of their sole negligence, from all losses, injury, damages, fees and other expenses arising out of or in connection with participation in the Adult Co-Ed Softball League Program. In addition, I give permission to be treated by qualified medical personnel in the event that my emergency contact person can not be reached at the phone numbers provided.

Signature _____ **Date** _____